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ABSTRACT

This study examined the effectiveness, integrity, and acceptability of Conjoint Behavioral Consultation (CBC) with families and teachers of Hispanic children at risk for development of behavior problems. CBC is a four-step problem-solving approach (problem identification, problem analysis, treatment implementation, and treatment evaluation) that systematically promotes the active participation of parents in collaboration with school personnel. Seven children in a Tulsa (Oklahoma) Head Start program were subjects in an evaluation of the CBC process. Challenges encountered were related to participant recruitment, effective communication, scheduling and keeping appointments, following the CBC format, and data collection. Results indicated acceptability of interventions by parents and teachers, acceptability of the CBC process, greater treatment integrity by teachers than parents, and positive ratings for intervention effectiveness by both teachers and parents. The study concluded that CBC provides a viable option in service delivery when addressing the needs of preschool children of Hispanic heritage but offers recommendations concerning the need to emphasize a success orientation, data collection techniques, and the interpreter's role. (DB)

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Implementing Conjoint Behavioral Consultation with Hispanic Parents: A Study of Effectiveness, Integrity, and Acceptability

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Executive Summary

Purpose

The purpose of this study was to examine the effectiveness, integrity, and acceptability of Conjoint Behavioral Consultation (CBC) with families and teachers of Hispanic children at risk for development of behavior problems. As an extended format of behavioral consultation, CBC is a 4-step problem-solving approach (Problem Identification, Problem Analysis, Treatment Implementation, and Treatment Evaluation) that systematically promotes the active participation of parents in collaboration with school personnel. It was hypothesized that the parity of family and school participants promoted by CBC would acknowledge cultural norms and values and linguistic attributes of the Hispanic families without relying on stereotypes. Thus, results would include strong treatment acceptability and integrity by participants, leading to enhanced treatment effectiveness and generalization.

Context

Census 2000 data reflect significant growth of the Hispanic population across the United States. With such overall growth comes increasing numbers of children with Hispanic heritage in the public schools. Since cultural and linguistic differences increasingly put children at risk for behavior and academic problems, and there is an over representation of Hispanic children and youth among special education and dropout statistics, the need for early intervention is evident.

Though parental involvement has long been correlated with student success, the unique characteristics of the Hispanic family have challenged our traditional service delivery models. This has led to a not uncommon assumption by the schools that Hispanic parents do not care about their children's education. To the contrary, however,

Hispanic parents do have high expectations for their children. The dramatic increase in numbers of Hispanic students in our public schools underscores the significance of reconciling such discrepancies of expectations and reality. Thus, more effective ways of addressing the needs of Hispanic students are needed which take into consideration the unique cultural characteristics and language diversity that they bring to our schools.

Methods

Acknowledging such growth and early intervention concerns, the Head Start Program of Tulsa, OK, was cooperative in the completion of this project by identifying a building site within a high Hispanic student capture area in which the study could be implemented. Parents and teachers of Hispanic children from the Head Start program were recruited for participation using a variety of methods including flyers, teacher contact, and project presentation at a monthly meeting for Hispanic parents. The parents and teachers of students who met qualifying criteria from the Social Skills Rating System (SSRS) - Parent and Teacher forms were included in the study for a total of ten cases. Follow-up behavior ratings using the Behavioral Assessment for Children (BASC) were done with each of the ten qualifying cases. The stages of Conjoint Behavioral Consultation were the guiding format for this study, which included four phases: Problem Identification; Problem Analysis; Treatment Implementation; and Treatment Evaluation. Graduate students trained in behavioral consultation served as consultants and an interpreter was used during consultation sessions as needed. Printed material was translated into Spanish when needed, as well. Baseline data were collected on target behaviors, with intervention implementation lasting 4 weeks. Consultation sessions including teacher, parent, and consultant were held each week during the 4-week intervention implementation stage. Goal Attainment Scale (GAS) ratings were obtained

from teachers and parents for both baseline and intervention weeks. A 5-point scale ranging from "-2", defined as the target behavior observed less than 20% of the time, to "+2", defined as the target behavior observed 80% or more of the time, and "0" reflecting the target behavior observed approximately 50% of the time, was used for the GAS ratings. Treatment integrity ratings during the 4-weeks of intervention were also completed for both teacher and parent participants. At the final treatment evaluation session, parents and teachers completed a Treatment Evaluation Questionnaire and Consultation Services Questionnaire. Two cases terminated participation prior to study completion and one case was unavailable for completion of the Treatment Effectiveness (TEQ) and Consultation Services (CSQ) questionnaires as a result of the family moving.

Table 1

Child Participant Identification and CBC Completion

# Children Meeting Participation Criteria	# Children Completed CBC	Early Termination		
		Pre PII	Pre PAI	Pre TEI
10	7	0	2	1*

Note. * Incomplete TEQ and CSQ

Table 2

Child Participant Demographics

Gender	Mean Age	Target Behavior	Hispanic Ancestry	Home Language	Mean # Yrs in US	Mean Parent Edu
Male 4 Female 4	4.8	Compliance 4 Participation 3 Crying 1	Father 1 Mother & Father 7	Spanish 6 English 2	4.5	9th grade

Challenges

Challenges encountered during this project were related to participant recruitment, effective communication, scheduling and keeping appointments, following the CBC format, and data collection. Though all of these elements are common to behavior consultation practice and research, the language and cultural characteristics of the Hispanic parent participants cast a unique flavor to their expression and resolution.

Participant recruitment. Initial recruitment flyers and presentations described potential child participants as children who were considered at-risk for development of behavior problems. This was misinterpreted by both teachers and Hispanic parents, and resulted in very limited referrals. Upon reviewing recruitment materials and consultation with teachers, it was determined that the phrasing including "behavior problems" was the source of misunderstanding. Teachers interpreted the criterion as only focusing on externalizing, disruptive behaviors, and reported that Hispanic children did not typically exhibit such behaviors. Hispanic parents interpreted it as meaning their children would be labeled as "bad", which was not conducive to positive rapport building. Addressing this source of misunderstanding required onsite consultation with the Head Start teachers to better understand the behavioral concerns they had for Hispanic children, as well as sensitive acknowledgement of the support of Hispanic parents for their children. Teachers reported that internalizing-type behavior such as acting shy and being hesitant to initiate peer interaction and attempt new activities was more characteristic of Hispanic preschool children. They identified such behavior as concerning in that it was considered to limit the children in gaining maximum benefit from available educational experiences. Thus, language used in recruitment was modified to emphasize a school success orientation with both teacher and parent response being improved.

A second issue affecting recruitment and project participation was that of involvement, or approval, by the father. Though the parent who typically gave initial consent and met with the teacher and consultant during the CBC process was the Hispanic mother, the father's eventual disapproval resulted in termination in two situations. In the case of two children whose CBC process had progressed to the treatment implementation stage, project participation was ended with the mother explaining that the father had decided they should not continue. The fathers of two other children attended the first couple of sessions with their wives before the mothers continued alone in the parent consultee role. As this issue became apparent, greater efforts were made to include the Hispanic fathers in the CBC process, particularly in intervention treatments, so as to acknowledge their importance in their children's lives.

Communication/Interpreter. In keeping with the community and parent involvement that is basic to Head Start programs, the building director requested that a Hispanic parent serve as interpreter. This was both a benefit as well as hindrance. The parent identified by the director was very sensitive and proficient when working with Hispanic parents, and training was done emphasizing objective interpretation of what was said during consultation sessions. However, her congeniality coupled with the parents' preference for personal rapport sometimes resulted in a familiarity that could be considered to have stretched standardization guidelines. In an effort to improve standardization, an interpreter was hired who was not connected to the Head Start program. This proved even less effective, however, in that both teachers and parents, as well as consultants, were annoyed by what seemed to be his promotion of personal opinions regarding child rearing. The second interpreter was terminated in favor of the rapport-enhancing interaction of the parent interpreter. The practice of using parents as

interpreters appeared to be common to this particular Head Start program, and teachers were observed to frequently call upon Hispanic parents who spoke English to assist during parent-teacher conferences. Bilingual parents were also often noted to assist Spanish-only parents on a more informal basis. Therefore, the use of another parent or other familiar person as an interpreter might be considered beneficial to consultation outcomes by acknowledging the suggested preference by Hispanic parents for a more personal relationship among consultation participants than is traditional for behavioral consultation practice.

On one occasion, the Hispanic parent insisted that she understood English well and refused the use of an interpreter. It became apparent, however, that such was not the case, and that there was a risk of misunderstanding. Rather than possibly insulting her by insisting that an interpreter be used, greater time, repetition, and rewording concepts using more practical examples were used during consultation communication.

Appointments. Scheduling and keeping consultation appointments was somewhat problematic, affecting every consultation case at one time or another. Underlying this issue was the position of the consultant as being outside the Head Start program and not regularly onsite. Change in parent work schedules and commitments to other children in the family or extended family members were the most frequent causes of missed appointments. Participant children being sick or taken out of school early on the consultation appointment day also resulted in consultee parents not coming to the school as scheduled. Coordination with the interpreter along with the consultant being from out of the local telephone calling area resulted in missed appointments. Consultants also experienced last minute delays and/or interruptions preventing them from keeping some appointments as scheduled. Parents did not express concern, but rather accepted these

instances as a matter of everyday life. Observation of Head Start protocol in such matters revealed that although attempts to schedule appointments for parent-teacher conferences were always made, it was common practice to "catch parents" whenever possible such as when they brought their children to school or picked them up. This was an accommodation for the parents' needs in balancing work and family commitments in an environment that could be unfamiliar and limited in support of their traditional lifestyles. Therefore, rather than inferring that parent absences demonstrated a lack of interest and concern for their children's educational success, the importance of family within the Hispanic culture was recognized. This allowed for positive reframing, resulting in the perspective that greater flexibility was required to allow Hispanic parents to attend to the many variables impacting the lives of their family members and themselves.

CBC structured format. The Conjoint Behavioral Consultation model provides a very structured format including specific chronology and script for consultation stages. Though such a format promotes efficient use of time, it can compromise personal relationship building among consultees and consultant when rigidly followed. Initially consultants attempted to strictly adhere to the CBC script, but it became apparent that such adherence was counterproductive to trust necessary for effective problem solving. Greater time and attention was given to developing personal relationships between the consultants and parent consultees extending the scope of discussions to include the revealing of more personal information about the consultants and their own families as well as issues pertaining to other members of the parents' families. It is considered that such format modifications reinforced the egalitarian and collaborative philosophies that are underpinnings to Conjoint Behavioral Consultation.

Data Collection. Basic to behavior consultation is the concept of collection of observable and measurable data relevant to target behaviors and intervention implementation. Though in every case, consultants and parent consultees jointly developed objective data collection methods for the parents to use in the home setting, limited, and in most cases no, success was achieved in parent follow-through with agreed upon methods. Inquiries as to data collection were typically met with narrative reports by parents, but no "hard" evidence. The value of behavioral change documentation using such paper-and-pencil/counting methods did not seem shared by the Hispanic parents, with their, again, demonstrating a preference for greater personal relationship building afforded by the narrative style. Their narrative responses provided richness to the setting, or environmental, variables that might otherwise have been missed using more objective data collection methods.

A second issue pertaining to data collection was that of what appeared to be patterned responses on the SSRS and BASC rating scales. In most of such instances, parents consistently marked the "sometimes" option when describing how often their child exhibited a particular behavior. This happened regardless of whether parents completed the scales independently, the consultant verbally asked the questions, or when an interpreter was used. Follow-up questioning/clarification as well as more informal investigation using conversation typically yielded greater specifics in identifying concerning behaviors. It is suggested that these observations were, again, related to the parents' preference for personal relationship building within the context of problem solving.

Results

Q #1, Acceptability: Did the parents and teachers of preschool Hispanic children find the interventions developed during CBC acceptable?

Parent Treatment Evaluation Questionnaires (TEQ) were completed for seven of the eight cases. Case #6 family moved before completing the interventions. Based on a 6-point scale, mean scores on the parent form of the TEQ ranged from a 4, or "slightly agree", to a 6, "strongly agree", reflecting overall parent satisfaction with the treatment interventions developed and implemented during CBC with the overall mean Parent TEQ = 5.09.

Mean scores on the teacher form of the Treatment Evaluation Questionnaire ranged from a 3,"slightly disagree", to a 6, "strongly agree", reflecting a greater range of satisfaction with the treatment interventions developed and implemented during CBC. The overall mean of the teacher ratings, however, was 4.91, which does suggest relative satisfaction. Without the Case #6 low score, the overall Teacher TEQ = 5.11 is more consistent with the Parent TEQ results. Case #6 was the family that moved before completing the interventions.

Table 3

Parent and Teacher Responses on Treatment Effectiveness Questionnaires

Case	Mean*	SD	Case	Mean*	SD
Case #1			Case #5		
Parent	4.30	.47	Parent	4.35	.75
Teacher	5.90	.45	Teacher	4.95	.94
Case #2			Case #6		
Parent	4.85	.75	Parent	---	---
Teacher	4.65	.59	Teacher	3.53	1.37
Case #3			Case # 7		
Parent	5.15	.67	Parent	6.00	.00
Teacher	4.85	.67	Teacher	5.50	.51
Case #4			Case #8		
Parent	6.00	.00	Parent	5.00	.00
Teacher	5.70	.73	Teacher	4.20	1.58

Note. * Scores range from 1-6, with greater scores indicating stronger intervention acceptability.

Q #2, Acceptability: Did the parents and teachers of preschool Hispanic children find the CBC process acceptable?

Parent Consultation Services Questionnaires (CSQ) were completed for seven of the eight cases. Case #6 family moved before completing the interventions. Using a 7-point scale, with "1" reflecting most negative attitude and "7" reflecting most positive attitude, mean scores for parent responses on the CSQ reflected positive attitudes toward use of the CBC process with the overall mean score for Parent CSQ = 5.68. Half of the

parent mean ratings were 6.0 or greater. Cases #5 and#8 were lowest in their ratings and also demonstrated the greatest variation.

Mean scores for teacher responses on the CSQ also reflected generally positive attitudes toward use of the CBC process. The overall mean for Teacher CSQ responses was equal to 5.68, and consistent with parents. Also similar to Parent CSQ results, the mean Teacher CSQ score for Case #8 was the lowest and also reflected greatest variation.

Table 4

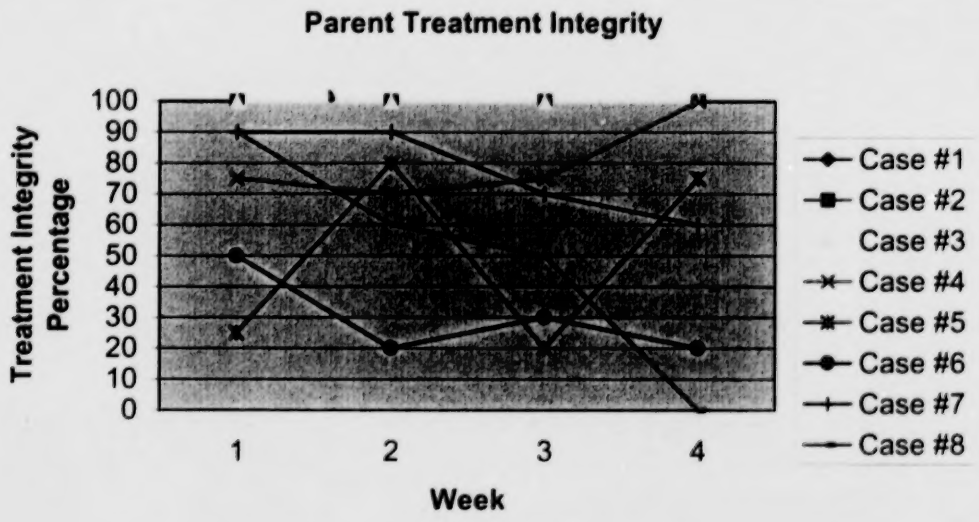
Parent and Teacher Responses on Consultation Services Questionnaires

Case	Mean*	SD	Case	Mean*	SD
Case #1			Case #5		
Parent	6.27	.79	Parent	5.00	1.18
Teacher	6.80	.42	Teacher	5.90	1.10
Case #2			Case #6		
Parent	6.09	.30	Parent	---	---
Teacher	5.70	.48	Teacher	4.50	.93
Case #3			Case # 7		
Parent	6.00	.45	Parent	6.40	.52
Teacher	6.20	.42	Teacher	5.70	.82
Case #4			Case #8		
Parent	5.80	.60	Parent	4.18	1.08
Teacher	6.70	.48	Teacher	4.00	1.56

Note. * Scores range from 1-7, with greater scores indicating stronger intervention acceptability.

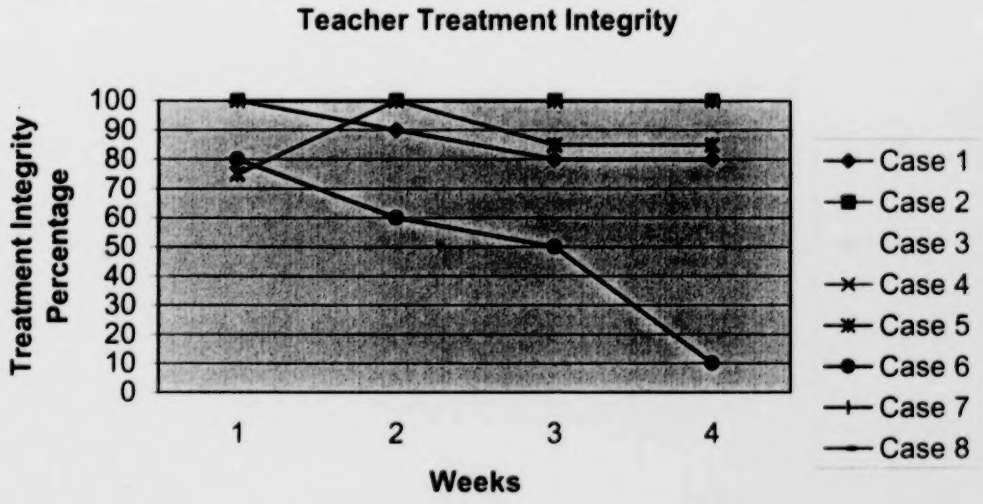
Q#3, Integrity: What was the level of treatment integrity by the parents and teachers of Hispanic preschool children resulting from CBC?

With the exception of cases #1, #2, and #3, which were consistently at 100%, treatment integrity by parents varied. Treatment Integrity of Cases #6, #7, and #8 declined over the 4-week intervention period. Treatment Integrity ratings were difficult to determine because parents typically did not provide visual data.



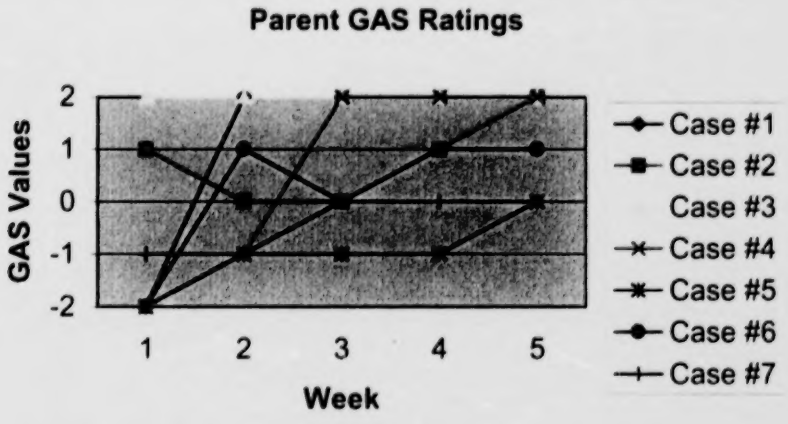
Teacher treatment integrity varied on only three of the eight cases, Case #1, Case #5, and Case #6. On the remaining five cases, teacher treatment integrity was judged to be at 100%. Teacher treatment integrity declined somewhat over the 4-week intervention period for Cases #1 and #2. The recorded marked drop for Case #6 was associated with the family moving prior to intervention completion. Though the teachers involved did provide some visual data as to treatment integrity, the ratings were in part based on

subjective descriptions of treatment implementation by the teachers.



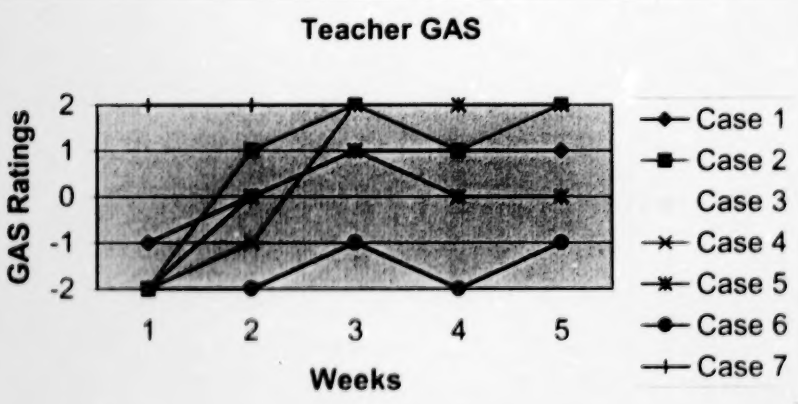
Q#4, Effectiveness: Did the parents and teachers of preschool Hispanic children find the interventions developed during CBC effective?

Parent Goal Attainment Scale (GAS) profiles depict overall trend of improvement of target behaviors for all participants. Case #3 implemented an intervention that had been mentioned during the PII when example strategies had been given by the consultant



as a part of the CBC process explanation discussed with the parent. This resulted in improved behavior prior to the first GAS rating. The parent liked the intervention, so it was continued for reinforcement and maintenance of the new behavior.

Teacher Goal Attainment Scale (GAS) ratings reflect the greatest improvements in target behaviors for Cases #2 and #4. Again, it is noted that Case #3 implemented an example intervention mentioned during the PII resulting in improved behavior prior to the first GAS rating. The behavior targeted in Case #7 was not one that would be specifically observed in the classroom (compliance with leaving the grandparents home on the weekend), and, therefore, the teacher made her GAS ratings based on related behaviors in the classroom which proved to be satisfactory to her. The teacher for Case #6 reported the least observed improvement. In addition to Case #6 moving before study completion, the teacher indicated there may have been a greater level of family instability associated with this family which may have contributed to more limited improvement.



Implications

Conjoint Behavioral Consultation does provide a viable option in service delivery when addressing the needs of preschool children of Hispanic heritage based on the results

of this study. Target behaviors for all child participants were considered improved by both parents and teachers over the 4-week intervention phase. Though the study suggests that considerations and modifications during the implementation of the CBC model with this population may be beneficial, it is, nevertheless, the collaborative philosophy underpinning this structured behavior change model that affords the researcher or practitioner the opportunity to accommodate for the unique cultural and individual qualities of the participants. The following recommendations are made based on the results and experiences gained during this research study, and are offered as applicable to not only the use of Conjoint Behavioral Consultation, but with regard to interaction with parents of Hispanic children, in general, when addressing issues pertaining to their children.

It is imperative that a success orientation is emphasized with parents of Hispanic children when identifying target behaviors and developing interventions. Ignoring this will seriously limit research participation, as demonstrated in this study, and foster suspicion and mistrust in practice. The parents of this study expressed attentive eagerness when judgmental behavior labeling was avoided in favor of discussing their children in terms of promoting greater success associated with learning and school participation, as well as individual and family happiness. Another recommendation that seems particularly relevant to working with parents of Hispanic children, whether in terms of research or practice, is that greater time should be allotted for rapport building between parents and other CBC participants. Such time is essential to learning and exercising sensitivity with respect to home resources of time, space, caregivers, and language. Consistent with conclusions resulting from multicultural therapy experiences, the parent participants in this study welcomed a greater personal knowledge of the

consultants, and even readily inquired as to the consultants' families. Their conversations also characteristically incorporated the whole family into discussions pertaining to the preschool child. Furthermore, though the mother typically assumed the caregiver role and participated as the consultee during the CBC sessions, the father's influence in the family was an ever-present element to be considered. This was ultimately demonstrated by the early termination of two cases because of the father's objection. Though CBC is a very structured, even scripted, behavior consultation model, there is within each step the flexibility to take time to build a more personal rapport, and the step structure actually promotes greater investigation of setting events that would include unique family characteristics.

Probably the greatest challenge to the use of CBC experienced during the course of this study was associated with data collection. The collection of observable and measurable data from which to identify target behaviors, develop interventions, and evaluate the success of those interventions is an integral component of the CBC process, as with all behavior consultation models. Daily collection and recording of data was an unfamiliar activity for the parents of this study, as is often the case for consultees in behavior consultation. Again, parents expressed a preference for more personal interaction by their very explicit verbal accounts of intervention trials and subjective descriptions of outcomes. Thus, creativity in developing meaningful, non-intrusive data collection techniques would be beneficial to the consultant using CBC with parents of the Hispanic population.

The role of an interpreter is to enhance communication and understanding among consultant and consultees. In the course of their training, it is usually emphasized that interpreters should only translate/interpret exactly what is said by the consultation

participants while avoiding any personal involvement. Subsequently, it follows that interpreters are typically preferred who do not have a prior personal relationship with those for whom they are interpreting. However, experiences associated with this study tend to be contradictory to such standard practices and suggest benefits from less clear boundaries between interpreter and consultation participants. The Hispanic parents' preference for greater personal interaction extended to the interpreter, as well. The presence of another person who could not only speak their language, but also had greater knowledge of their unique cultural, as well as personal, attributes and limitations, appeared to put parents at ease and enhanced openness in discussion. Certainly this places an added dimension to interpreter training and responsibility in that greater attention must be given to tempering personal relationships with objective interpretation.

The results and experiences associated with this study lead to two additional recommendations with regard to the implementation of Conjoint Behavioral Consultation, or other programs, with teachers and parents of preschool Hispanic children. Ideally, consultants should be onsite so as to afford greater flexibility in meeting the time demands of both teachers and parents. Finally, enlisting the cooperation of existing parent organizations lends credibility and provides access to a greater audience in disseminating information about proposed programs.

In conclusion, the contributions of this study, consistent with those identified in the grant proposal, include (1) strong support for the use of CBC with teachers and parents of Hispanic children as reflected by their positive effectiveness, integrity, and acceptability ratings, (2) increased knowledge and understanding of strategies promoting positive relationships between Hispanic families and schools by demonstrating that active participation of family members affords the opportunity to incorporate the unique

Hispanic cultural and language characteristics necessary for intervention success, (3) enhanced knowledge pertaining to alternative service delivery models addressing multicultural needs of school children, and (4) extended repertoire of problem prevention and early intervention strategies available to educators.

Results from this funded research have already been disseminated at a state level in a poster presentation to the Oklahoma School Psychological Association and at the national level in a poster presentation at the 2001 Convention of the American Psychological Association. A poster presentation will also be made at the 2002 Convention of the National Association of School Psychologists. Articles pertaining to various components of this research are being prepared for submission to professional journals for publication. A dissertation using and expanding upon the objective results of this investigation is being completed. Furthermore, this study has served as a base from which additional research is being pursued related to service delivery in our nation's increasingly diverse public schools.